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NEVADA CORRECTIONS COSTICES Office (if applicable) Name (print) District (if applicable) 4030x 2091 CARSON CITY NEUROA 882-7531 Mailing Address (include city and zip code) Telephone No. E-Mail Address Select Appropriate Box(es) CANDIDATE FIND EXP ☐ AMENDED Report #1 — Due August 27, 2002 Office with a 2-year term Period: Jan. 5, 2001 --- Aug. 22, 2002 Dec. 20, 1998 — Aug 22, 2002 Office with a 4-year term Period: Office with a 6-year term Period: Dec. 6, 1996 — Aug 22, 2002 **BAGs only:** Period: Dec. 7, 2000 – Aug 22, 2002 Report #2 Due — October 29, 2002 Period: Aug. 23, 2002 — Oct. 24, 2002 Report #3 Due — January 15, 2003 FOR OFFICE USE ONLY Oct. 25, 2002 — Jan. 3, 2003 BAGs only: Period: Oct. 25, 2002 - Dec. 5, 2002 BALANCE This figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if any CONTRIBUTIONS SUMMARY "Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer received. (NRS 294A 007) 1. Total amount of monetary contributions in excess of \$100 2. Total amount of monetary contributions of \$100 or less Actual number of monetary contributions of \$100 or less 3. Interest and income earned on contributions, if any 4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 through 3) 5. Total amount of In Kind Contributions **EXPENSES SUMMARY** 6. Total amount of monetary expenses in excess of \$100 7. Total amount of monetary expenses of \$100 or less 8. Expense for filing fee 9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through 8) Remaining Balance (Subtract line 9 from 4) 10. Total amount of In Kind Expenses **AFFIRMATION** declare und perjury that the foregoing is true and correct.

Revised: MAR-02

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